

## HE UNITED STATES PATENT AND TRADEMARK OFFICE

## **MS AMENDMENT**

In re Patent Application of

Daniel Asselineau et al.

Group Art Unit: 1641

Application No.: 40/619,188

Examiner: CHANGHWA J. CHEU

Filing Date:

July 15, 2003

Confirmation No.: 4954

Title: ANTIBODIES SPECIFIC FOR PAPILLARY FIBROBLASTS AS MARKERS FOR SKIN QUALITY

## AMENDMENT/REPLY TRANSMITTAL LETTER

**Commissioner for Patents** P.O. Box 1450 Alexandria, VA 22313-1450

Enc	osed is a reply for the above-identified patent application.						
X	A Petition for Extension of Time is also enclosed.						
	Terminal Disclaimer(s) and the \$65.00 (2814) \$130.00 (1814) fee per Disclaimer due under 37 C.F.R. § 1.20(d) are also enclosed.						
X	Also enclosed is/are a Second Information Disclosure Statement and two references						
	Small entity status is hereby claimed.						
	Applicant(s) requests continued examination under 37 C.F.R. § 1.114 and enclose the   ☐ \$395.00 (2801) ☐ \$790.00 (1801) fee due under 37 C.F.R. § 1.17(e).						
	Applicant(s) requests that any previously unentered after final amendments <u>not</u> be entered. Continued examination is requested based on the enclosed documents identified above.						
	Applicant(s) previously submitted						
	on, for which continued examination is requested.						
	Applicant(s) requests suspension of action by the Office until at least which does not exceed three months from the filing of this RCE, in accordance with 37 C.F.R. § 1.103(c). The required fee under 37 C.F.R. § 1.17(i) is enclosed.						
	A Request for Entry and Consideration of Submission under 37 C.F.R. § 1.129(a) (1809/2809) is also enclosed.						

Attorney Docket No. 016800-634

Application No. \_\_10/619,188

X	No additional	claim fee	is	required.
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	An additional claim fee is required	, and is calculated as shown below.
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		AI	MEN	IDE	ED CLAIMS				
·	No. of Claims	Highes of Cla Previo Paid	ims usly		Extra Claims		Rate		Additional Fee
Total Claims		MINUS	20	=	0	x	\$50.00 (	1202) =	\$ 0.00
Independent Claims		MINUS	3	=	0	x	\$200.00 (	1201) =	\$ 0.00
If Amendment adds m	nultiple depen	dent claim	s, ad	d \$	360.00 (1203)			-	-
Total Claim Amendment Fee					\$ 0.00				
☐ Small Entity Status claimed - subtract 50% of Total Claim Amendment Fee					\$ 0.00				
TOTAL ADDITIONAL CLAIM FEE DUE FOR THIS AMENDMENT					\$ 0.00				

X	A check in the amount of	\$ 300.00	_ is enclosed for the fee due.
	Charge t	o Deposit Acc	ount No. 02-4800.
	Charge	to credit card.	Form PTO-2038 is attached.

The Director is hereby authorized to charge any appropriate fees under 37 C.F.R. §§ 1.16, 1.17, 1.20(d) and 1.21 that may be required by this paper, and to credit any overpayment, to Deposit Account No. 02-4800. This paper is submitted in duplicate.

Respectfully submitted,

BURNS, DOANE, SWECKER & MATHIS, L.L.P.

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Date: January 10, 2005

Mercedes K. Meyer Registration No. 44,939